-	- PAIEN		ctive Dec	ember 8, 20	NATION 004	I REC	ORD	00	7/8	389	320
				D - PART I mn 1)	(Column	2)	SMAL TYPE	L ENTI			HER THA
	TOTAL CLAII	MS]	 -			ALL ENTI
	FOR		NUMBI	NUMBER FILED NUMBER EXTRA 36 minus 20= *			RAT BASIC		0.00	RA	
•	TOTAL CHARC	SEABLE CLAIMS	36.				1				FEE 300.
11	NDEPENDENT	CLAIMS	17/1	minus 3 = *			X\$ 2		·	OR X\$5	0=
N	IULTIPLE DEF	ENDENT CLAIM			/		X100)= 	(OR X20	O= /
*	If the differen	ce in column 1	is less than	ess than zero, enter "0" in column 2 MENDED - PART II			+180	=		OR +360)=
							TOTA	T.		OR TOTA	AL /
		(Column 1)		D - PART (Cölumn		· · · · · · · · · · · · · · · · · · ·	CRAAL	LEAR			ER THAN
1	11/100	CLAIMS REMAINING		HIGHES NUMBER	T	umn 3)	SWAL	L ENTI		R SMAI	LL ENTITY
AMENDMENT	9 110	AFTER AMENDMENT		PREVIOUS PAID FO	SLY EX	ESENT TRA	RATE	TION	VAL	RATE	ADD TION
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AME	Independent		Minus	***	=	/	X100=		\dashv°	R X\$50	/
	THIST PRES	SENTATION OF M	IULTIPLE DE	PENDENT CL	AIM		X100=			R X200	
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		(Column 1)		(Column 2	2) (0-1	- O)	TOTA ADDIT. FE		OF	TOTA ADDIT, FE	EE
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	Total	*	Minus	**	=		X\$ 25=	FEE		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	FEE
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ļ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT CLA	MM [X100=	 	OR	X200=	
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ľ	-	CLAIMS REMAINING		(Column 2) HIGHEST	(Colun	nn 3)				,	
		AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESI		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
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